

PRELIMINARY INFORMATION FOR PRODUCT EVALUATION (PE)

Return Address:

Mr. Wayne Kling, P.E.
Research Engineer
Materials & Research Section
Delaware Department of Transportation
800 Bay Road
P.O. Box 778
Dover, DE 19903
302-760-2400

1. Trade Name _____
Date _____
Manufacturer _____
Phone Number _____
Street Address _____
City, State _____
Zip Code _____

2. Representative Co. _____
Phone Number _____
Street Address _____
City, State _____
Zip Code _____

3. Contact Individual _____
Phone Number _____
Street Address _____
City, State _____
Zip Code _____

4. Product Identification _____

5. Recommended Use - Primary _____

Other Use _____

6. Does your product meet any of the following specifications? If YES, provide specification references.

ASTM _____
AASHTO _____
DelDOT _____
Other _____

7. Composition of Material: (Attach laboratory reports and Material Safety Data Sheets (MSDS) when applicable.)

8. Are sample specifications enclosed? _____

9. Are plans, drawings, pictures or sketches enclosed?

10. Are structural and design calculations enclosed? _____

11. Are instructions for installation or application enclosed? _____

12. Has this product been rejected or disapproved by any government or private agency?

If YES, list what agency and contact person. _____

13. Has this product been tested? _____

If YES, provide test agency and results: _____

14. Provide information demonstrating the product properties and performance:

15. What is the estimated cost (material cost and in-place cost) of this product?

16. What are the competitive (alternate) products? Provide cost comparison:

17. Where is your product made or produced? _____

18. Can a demonstration be provided? YES _____ NO _____ WHEN _____

19. Are educational courses, training or videos available? YES _____ NO _____
Enclosed? YES _____ NO _____

20. Number of other agencies where approved: _____

21. Provide supporting documents, if approved for use by other agencies. Include names, contacts and whether routine or experimental use:

22. Other information (safety consideration, restrictions, environmental impact, etc.):

23. Have you contacted other representatives from the Dept of Transportation? _____
WHO _____

24. Person providing information _____

Title _____

Date _____

Signature _____